



# Iowa Influenza Surveillance Network (IISN)

## Influenza-like Illness (ILI) and Other Respiratory Viruses

### Weekly Activity Report

For the week ending January 12, 2019 - Week 2

All data presented in this report are provisional and may change as additional reports are received



#### Iowa Influenza Geographic Spread

No Activity	Sporadic	Local	<b>Regional</b>	Widespread
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Note: See CDC activity estimates for definition [www.cdc.gov/flu/weekly/overview.htm](http://www.cdc.gov/flu/weekly/overview.htm)

#### Quick Stats

Predominate influenza subtype	A(H1N1)pdm09
Percent of influenza rapid test positive	14% (296/2184)
Percent of RSV rapid tests positive	22% (102/468)
Influenza-associated hospitalizations	13/2258 inpatients surveyed
Percent of outpatient visits for ILI	1.13% (baseline 1.6%)
Percent school absence due to illness	1.80%
Number of long-term care outbreaks	0
Number of schools with $\geq 10\%$ absence due to illness	2
Influenza-associated mortality - all ages (Cumulative)	2
Influenza-associated pediatric mortality (Cumulative)	0
Predominate non-influenza virus	RSV

Note: Deaths are considered influenza-associated when influenza is listed on the death certificate. This is an underestimate of influenza-related deaths. Cumulative mortality totals are from 9/30/2018 to the current week.

#### Iowa statewide activity summary:

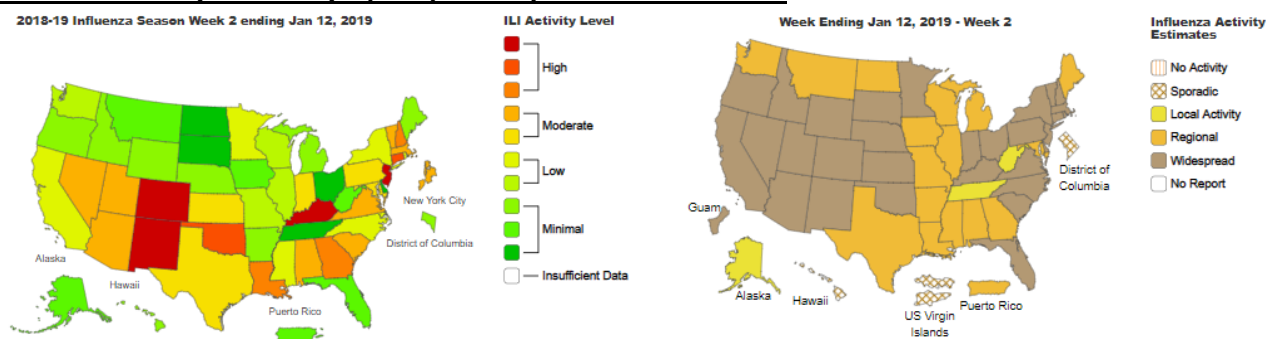
Influenza activity remains elevated and the geographic spread of influenza in Iowa is regional. Influenza A(H1N1) continues to be the predominate subtype detected at the State Hygienic Laboratory with 25 influenza A(H1N1)pdm09 and one influenza A(H3) viruses confirmed from submitted samples, as well as one influenza A positive specimen pending subtyping. Thirteen influenza-related hospitalizations were reported from sentinel hospitals. The proportion of outpatient visits due to influenza-like illness (ILI) decreased for the second week in a row to 1.13 percent, which was below the regional baseline of 1.6 percent. No long-term care outbreaks were reported, but two schools reported at least 10 percent absenteeism due to illness. One influenza deaths was reported. Surveillance sites most frequently detected the following non-influenza respiratory illnesses: 166 RSV, 151 rhinovirus/enterovirus, 142 coronavirus, and 49 adenovirus.

#### International activity summary - (WHO):

In the temperate zone of the northern hemisphere influenza activity continued to increase slowly. In the temperate zones of the southern hemisphere, influenza activity returned to inter-seasonal levels with exception of some parts in Australia. Worldwide, seasonal influenza A viruses accounted for the majority of detections.

Visit [www.who.int/influenza/surveillance\\_monitoring/updates/latest\\_update\\_GIP\\_surveillance/en/](http://www.who.int/influenza/surveillance_monitoring/updates/latest_update_GIP_surveillance/en/) for more information. It was last updated 1/7/2019.

## National activity summary - (CDC)-Last Updated for Week 2:



**Synopsis:** Influenza activity remains elevated in the United States. Influenza A(H1N1)pdm09, influenza A(H3N2), and influenza B viruses continue to co-circulate. Below is a summary of the key influenza indicators for the week ending January 12, 2019.

**Viral Surveillance:** The percentage of respiratory specimens testing positive for influenza viruses in clinical laboratories decreased slightly. Influenza A viruses have predominated in the United States since the beginning of October. Influenza A(H1N1)pdm09 viruses have predominated in most areas of the country, however influenza A(H3) viruses have predominated in the southeastern United States (HHS Region 4). The majority of influenza viruses characterized antigenically and genetically are similar to the cell-grown reference viruses representing the 2018–2019 Northern Hemisphere influenza vaccine viruses. None of the viruses tested were associated with highly reduced inhibition by any of the neuraminidase inhibitors (oseltamivir, zanamivir, and peramivir).

**Outpatient Illness Surveillance:** The proportion of outpatient visits for influenza-like illness (ILI) decreased from 3.5% to 3.1%, but remains above the national baseline of 2.2%. All 10 regions reported ILI at or above their region-specific baseline level.

**Geographic Spread of Influenza:** The geographic spread of influenza in Guam and 30 states was reported as widespread; Puerto Rico and 16 states reported regional activity; three states reported local activity; and the District of Columbia, the U.S. Virgin Islands and one state reported sporadic activity.

**Influenza-associated Hospitalizations:** A cumulative rate of 12.4 laboratory-confirmed influenza-associated hospitalizations per 100,000 population was reported. The highest hospitalization rate is among adults 65 years and older (31.9 hospitalizations per 100,000 population).

**Pneumonia and Influenza Mortality:** The proportion of deaths attributed to pneumonia and influenza (P&I) was below the system-specific epidemic threshold in the National Center for Health Statistics (NCHS) Mortality Surveillance System.

**Influenza-associated Pediatric Deaths:** Three influenza-associated pediatric deaths were reported to CDC during week 2.

Detailed information can be found online at [www.cdc.gov/flu/weekly/](http://www.cdc.gov/flu/weekly/).

### Laboratory surveillance program:

The State Hygienic Laboratory (SHL) is the primary laboratory in Iowa characterizing specimens for influenza surveillance. SHL reports the number of tests performed and the type and subtype/lineage of positive tests to the influenza surveillance network daily. SHL also sends a portion of specimens to CDC for further characterization.

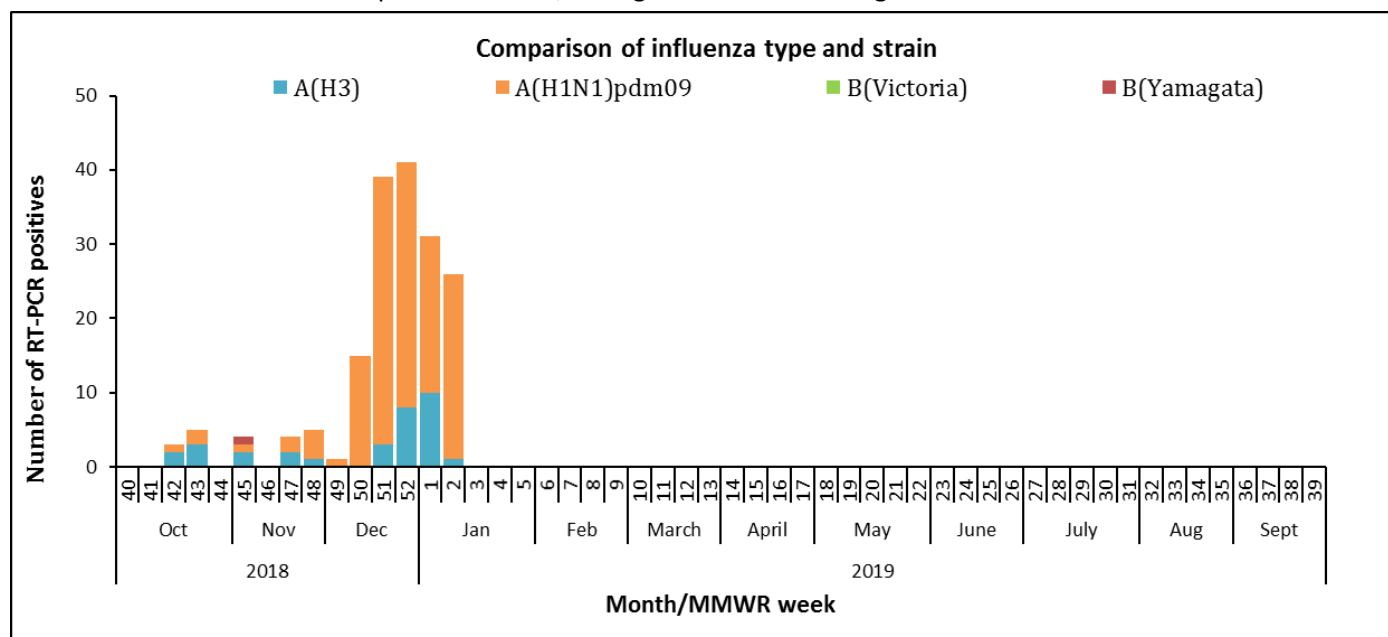
**Table 1: Influenza A viruses detected by SHL by age group**

Age Group	CURRENT WEEK				CUMULATIVE (9/30/18– CURRENT WEEK)			
	A(H1N1) pdm09	A(H3)	Not subtyped	Total	A(H1N1) pdm09	A(H3)	Not subtyped	Total
0-4	3	0	0	3 (11%)	14	1	0	15 (9%)
5-17	7	0	0	7 (26%)	33	6	0	39 (22%)
18-24	2	0	0	2 (7%)	9	1	0	10 (6%)
25-49	4	0	1	5 (19%)	34	3	2	39 (22%)
50-64	8	1	0	9 (33%)	37	11	0	48 (27%)
>64	1	0	0	1 (4%)	14	10	1	25 (14%)
<b>Total</b>	<b>25 (93%)</b>	<b>1 (4%)</b>	<b>1 (4%)</b>	<b>27</b>	<b>141 (80%)</b>	<b>32 (18%)</b>	<b>3 (2%)</b>	<b>176</b>

**Table 2: Influenza B viruses detected by SHL by age group**

Age Group	CURRENT WEEK				CUMULATIVE (9/30/18– CURRENT WEEK)			
	Victoria Lineage	Yamagata Lineage	Not subtyped	Total	Victoria Lineage	Yamagata Lineage	Not subtyped	Total
0-4	0	0	0	0 (0%)	0	0	0	0 (0%)
5-17	0	0	0	0 (0%)	0	0	0	0 (0%)
18-24	0	0	0	0 (0%)	0	0	0	0 (0%)
25-49	0	0	0	0 (0%)	0	1	0	1 (100%)
50-64	0	0	0	0 (0%)	0	0	0	0 (0%)
>64	0	0	0	0 (0%)	0	0	0	0 (0%)
<b>Total</b>	<b>0 (0%)</b>	<b>0 (0%)</b>	<b>0 (0%)</b>	<b>0</b>	<b>0 (0%)</b>	<b>1 (100%)</b>	<b>0 (0%)</b>	<b>1</b>

Table 1 and 2 Notes: Cell counts of three or less are sometimes suppressed to protect confidentiality. Totals by age may not add up to totals by subtype/lineage due to missing age information. Only cases of Iowa residents are included. Specimens listed as “not subtyped” may be pending or were not able to be subtyped due to weak positive lab results. This can be due to poor collection, timing of collection or stage of infection.



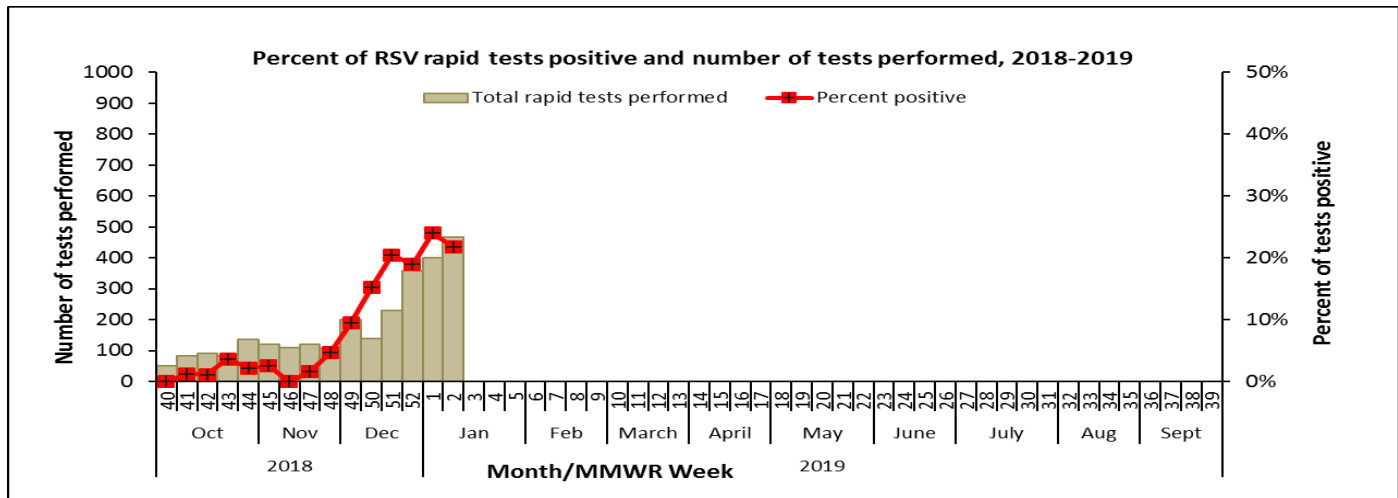
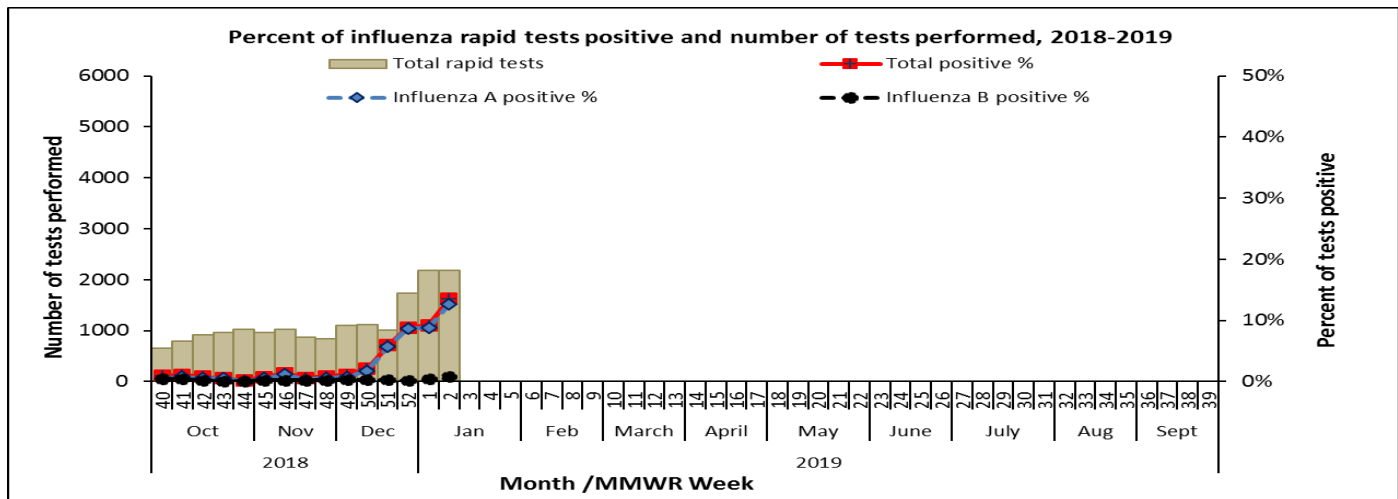
### Rapid influenza and RSV test surveillance:

The State Hygienic Laboratory (SHL) runs a weekly web-based survey program where laboratorians report the number of influenza and respiratory syncytial virus (RSV) rapid tests performed and the number of tests positive. This table includes only the number of patients tested for influenza or RSV at laboratory surveillance sites throughout the state. This table does not provide case counts.

**Table 3: Percent of influenza rapid tests positive and number of tests performed by region for the present week**

REGION	RAPID ANTIGEN INFLUENZA TESTS				RAPID ANTIGEN RSV TESTS		
	Tested	Flu A	Flu B	% Positive	Tested	Positive	% Positive
Region 1 (Central)	471	53	6	13	51	23	45
Region 2 (NE)	87	4	0	5	23	7	30
Region 3 (NW)	530	122	10	25	218	26	12
Region 4 (SW)	224	40	2	19	33	7	21
Region 5 (SE)	188	15	1	9	48	14	29
Region 6 (Eastern)	684	43	0	6	95	25	26
<b>Total</b>	<b>2184</b>	<b>277</b>	<b>19</b>	<b>14</b>	<b>468</b>	<b>102</b>	<b>22</b>

Note: see map in the school section for the counties in each region.

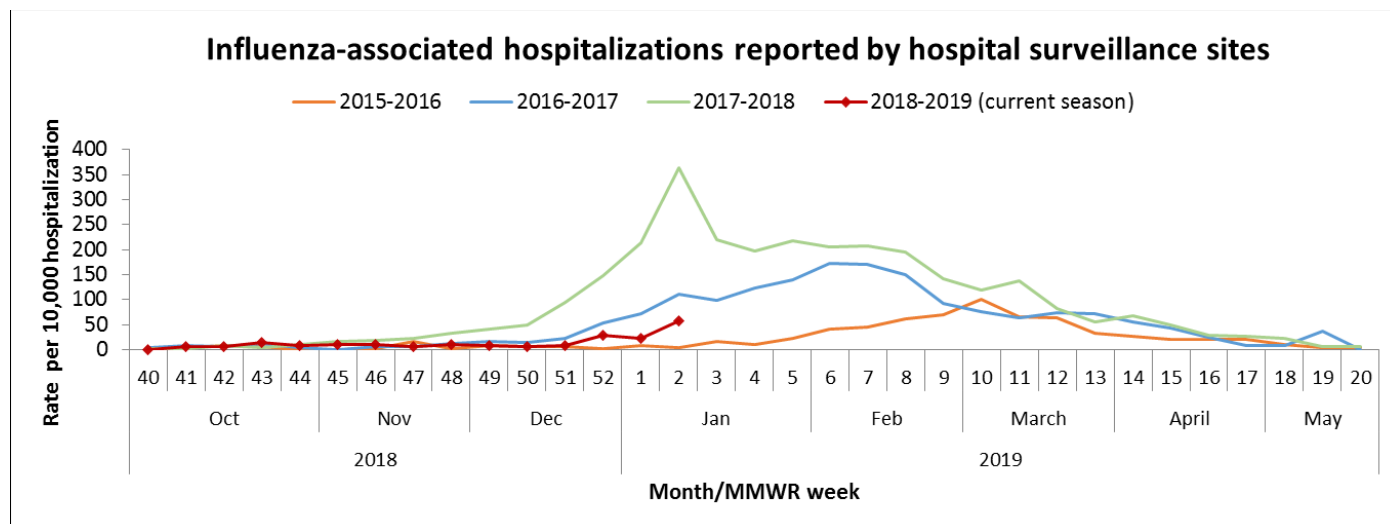
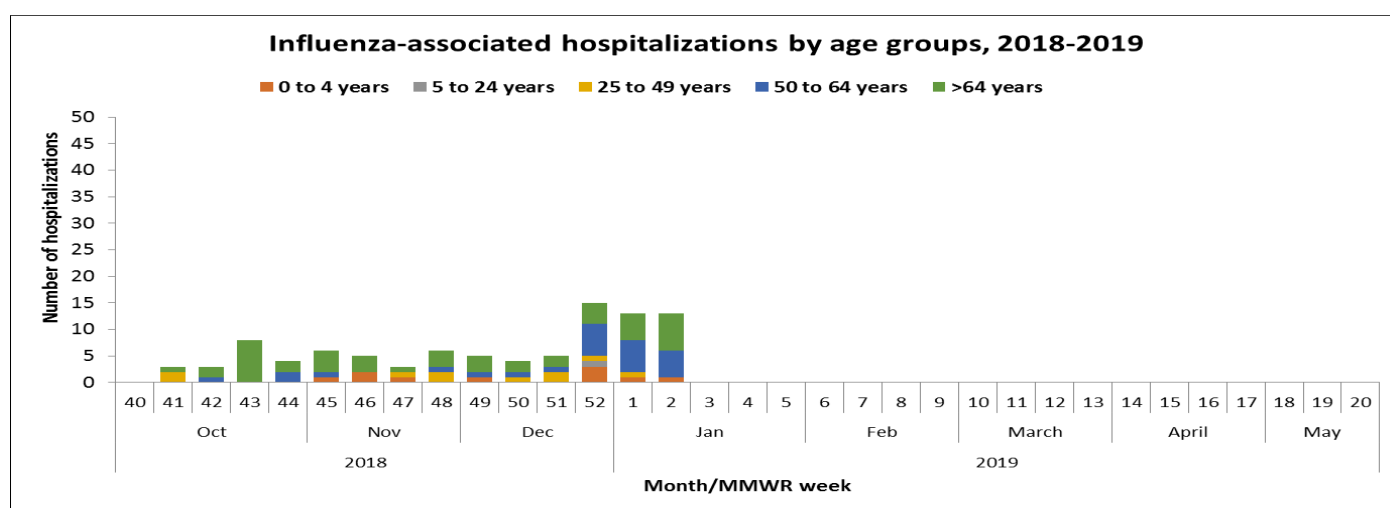


### **Influenza-associated hospitalizations:**

Sentinel hospitals that participate in IISN voluntarily track and report the number of influenza-associated hospitalizations and the total number of inpatients each week. Iowa hospitals interested in joining this surveillance program should contact Andy Weigel at 515-322-1937 or [andy.weigel@idph.iowa.gov](mailto:andy.weigel@idph.iowa.gov) for more information.

**Table 4: Number of influenza-associated hospitalization reported by age group**

AGE	CURRENT WEEK	CUMULATIVE (9/30/18– CURRENT WEEK)
Age 0-4	1	10
Age 5-24	0	1
Age 25-49	0	10
Age 50-64	5	25
Age >64	7	47
<b>Total</b>	<b>13</b>	<b>93</b>



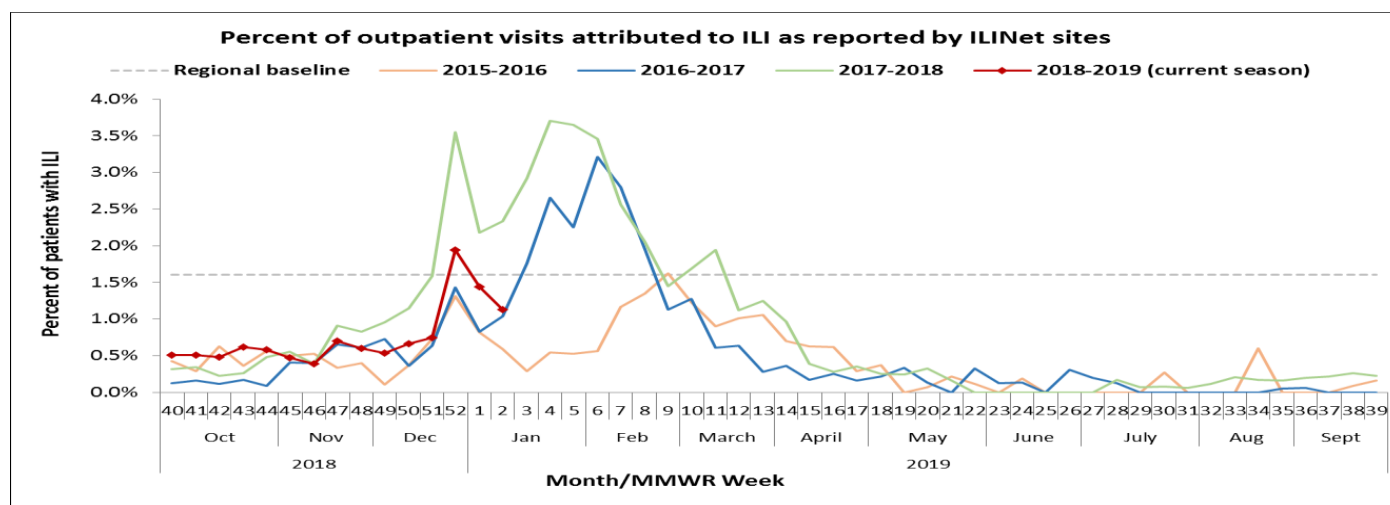
### Outpatient health care provider surveillance program (ILINet):

Outpatient health care providers who participate in the ILINet (a national influenza surveillance program) report the number of patients seen with influenza-like illness and the total number of patient visits each week. This system is a key part of Iowa's influenza surveillance. Iowa health care providers interested in joining this surveillance program should contact Andy Weigel at 515-322-1937 or [andy.weigel@idph.iowa.gov](mailto:andy.weigel@idph.iowa.gov) for more information.

**Table 5: Outpatient visits for influenza-like illness (ILI)**

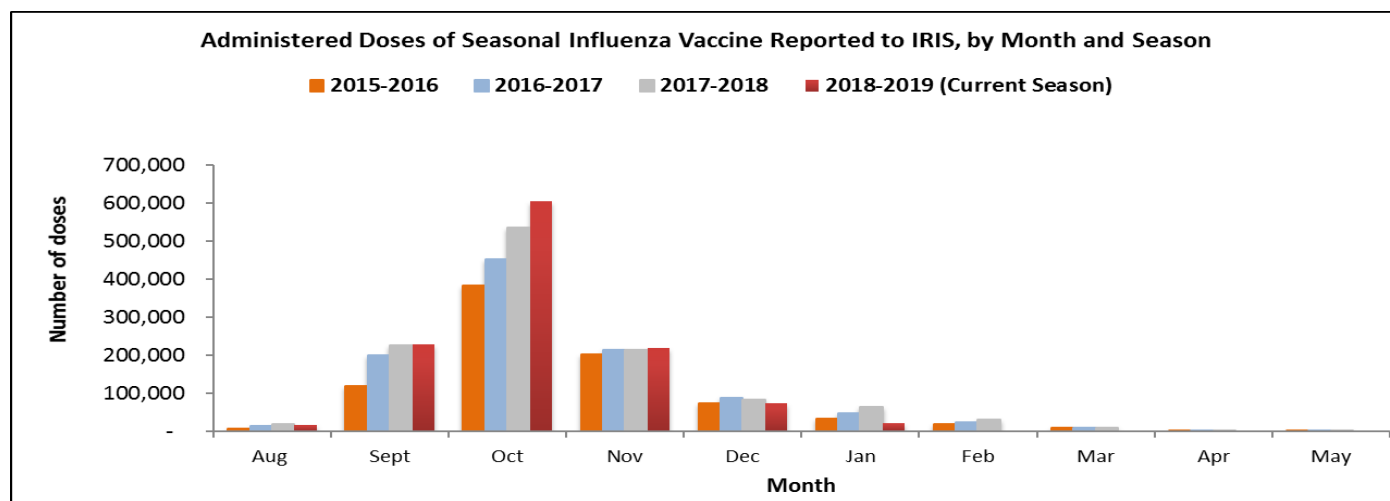
Week	Age 0-4	Age 5-24	Age 25-49	Age 50-64	Age >64	Total ILI	ILI Percent
Week 52, ending Dec 29	28	16	13	4	6	67	1.94
Week 1, ending Jan 5	18	20	14	4	8	64	1.44
Week 2, ending Jan 12	21	25	12	5	1	64	1.13

Note: Influenza-like Illness is defined as a fever of  $\geq 100^{\circ}$  F as well as cough and/or sore throat.



### Seasonal influenza vaccination:

Seasonal influenza vaccination data in Iowa is based on doses reported to the Iowa Immunization Registry Information System (IRIS). IRIS is a confidential, computerized, population-based system that tracks immunization for children, adolescents and adults who are seen in a variety of public and private healthcare provider sites throughout the state of Iowa. For more information on the immunization data, contact Kim Tichy, IRIS coordinator at 515-281-4288 or [kimberly.tichy@idph.iowa.gov](mailto:kimberly.tichy@idph.iowa.gov).



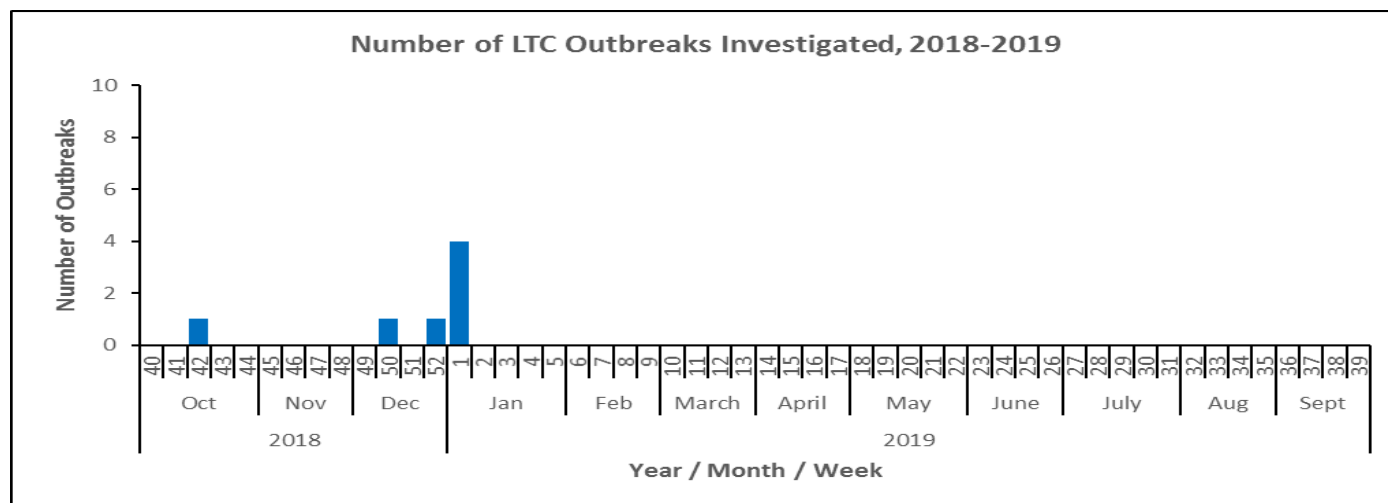
Note: The data for the 2018-2019 season is only up to the current week and there is a lag between the vaccine administration date and the date reported to the IRIS. The current season's data will be adjusted as additional data is received.

## Long-term Care Outbreaks:

Table 6: Number of long-term care outbreaks investigated

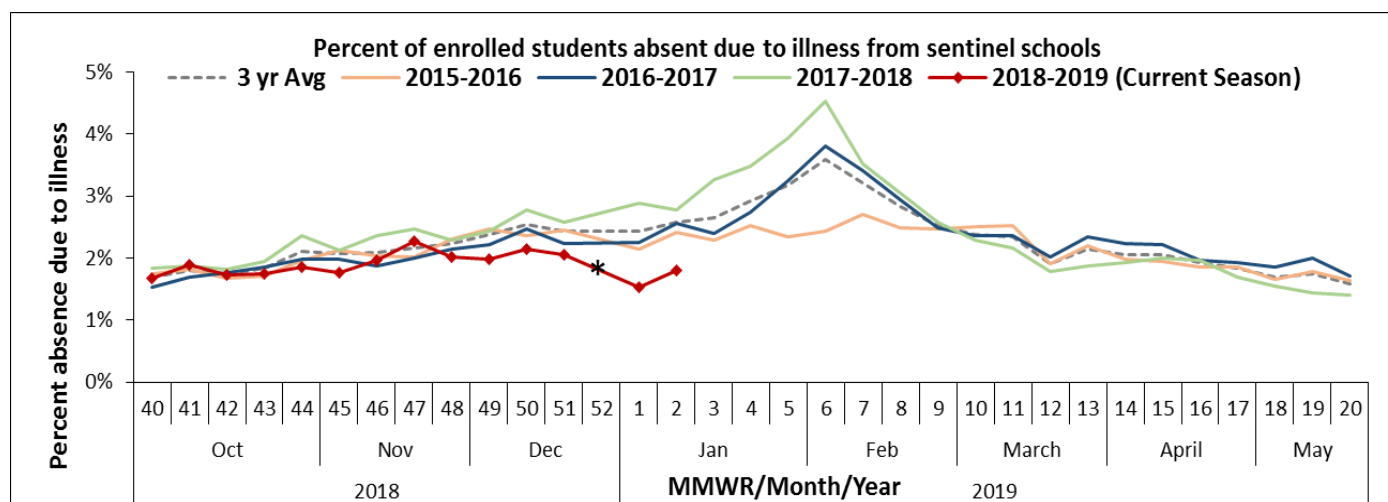
REGION	CURRENT WEEK	CUMULATIVE (9/30/18– CURRENT WEEK)
Region 1 (Central)	0	2
Region 2 (NE)	0	0
Region 3 (NW)	0	1
Region 4 (SW)	0	1
Region 5 (SE)	0	2
Region 6 (Eastern)	0	1
<b>Total</b>	<b>0</b>	<b>7</b>

Note: see map in the school section for the counties in each region.



## School surveillance program

IDPH monitors illnesses in schools from two different types of reporting: 10 percent school absence reports and weekly sentinel illness reporting. Iowa schools (K-12) track and report (including non-influenza illnesses) when the number of students absent with illness reaches or exceeds 10 percent of total student enrollment. Iowa sentinel schools that participate in IISN voluntarily track and report absence due to all illness and the total enrollment each week. This data provides excellent trends for influenza activity as well as age-specific information used to target vaccination efforts and messages.



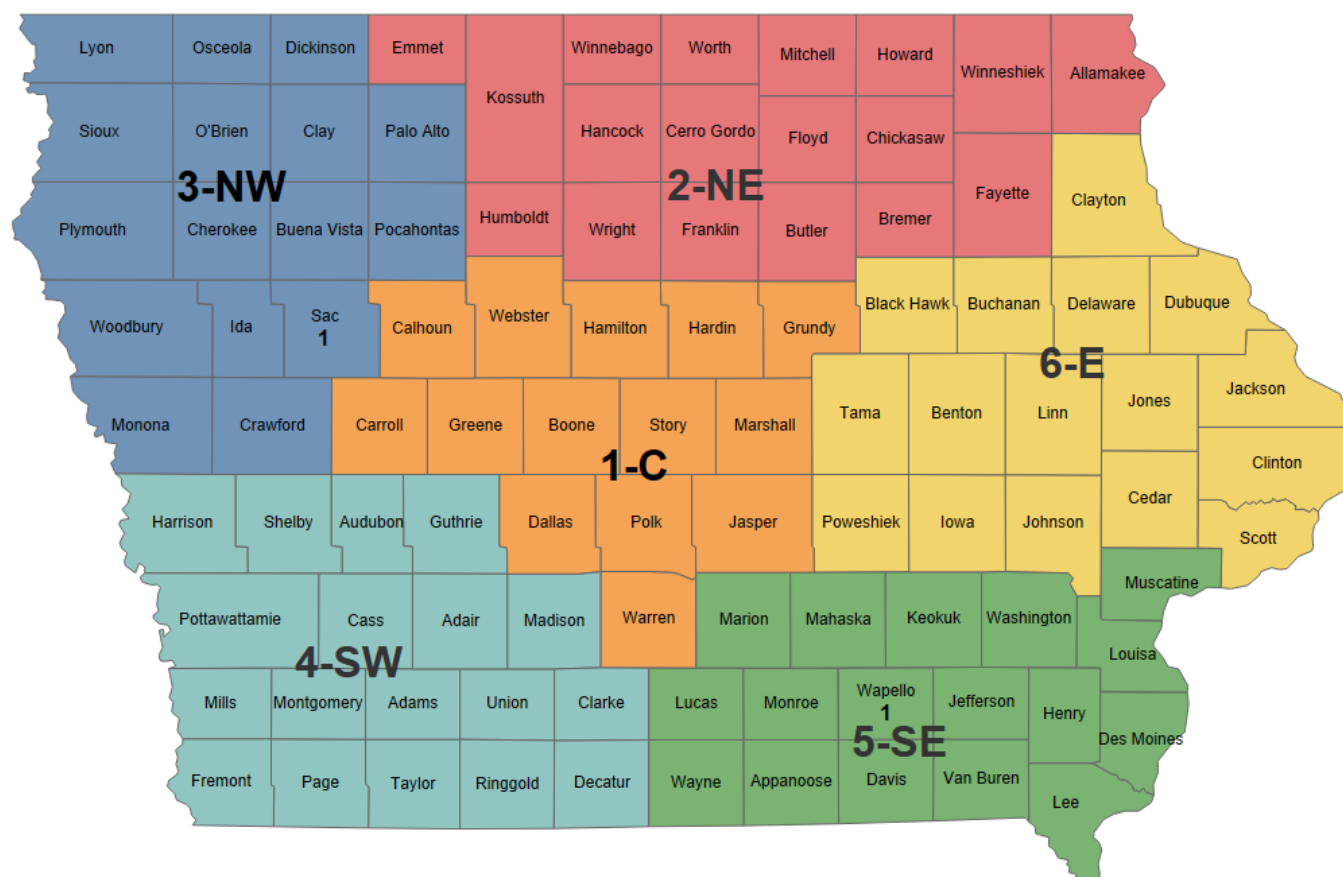
\*School data not reported for week 52 due to holiday closings

**Table 7: Number of schools reporting >10% absenteeism due to any illness**

REGION	CURRENT WEEK	CUMULATIVE (9/30/18–CURRENT WEEK)
Region 1 (Central)	0	0
Region 2 (NE)	0	0
Region 3 (NW)	1	1
Region 4 (SW)	0	1
Region 5 (SE)	1	1
Region 6 (Eastern)	0	4
<b>Total</b>	<b>0</b>	<b>7</b>

Note: See map in the school section for the counties in each region. Each school that reports 10 percent illness is counted only once per week for weekly numbers and only once per season for the cumulative reports.

### Iowa Influenza Region Map

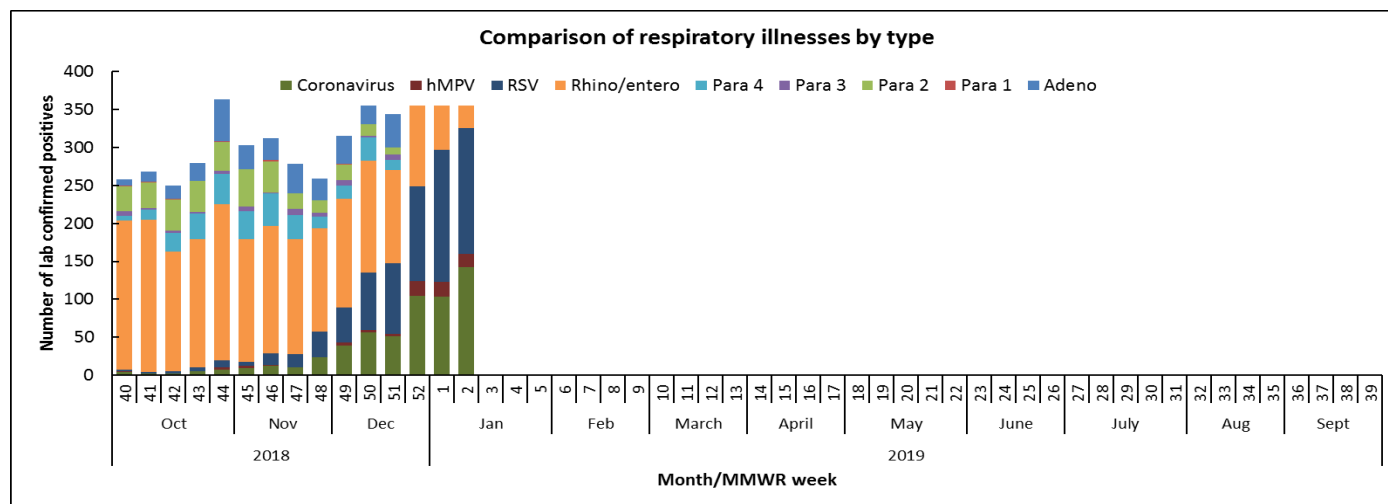


### **Non-influenza respiratory viruses:**

The State Hygienic Laboratory (SHL) runs a weekly web-based survey program where laboratorians report the number of positive tests for non-influenza respiratory viruses. This table also includes the positive non-influenza virus tests reported from the Dunes Medical Laboratories at Mercy Medical Center in Sioux City. The table includes only the number of positive tests at laboratory surveillance sites throughout the state. The table does not provide case counts.

**Table 8: Number of positive results for non-influenza respiratory virus collected by SHL, Mercy Dunes in Sioux City and Iowa Methodist Medical Center**

Viruses	CURRENT WEEK	CUMULATIVE (9/30/18–CURRENT WEEK)
Adenovirus	49	517
Parainfluenza Virus Type 1	0	10
Parainfluenza Virus Type 2	7	396
Parainfluenza Virus Type 3	8	76
Parainfluenza Virus Type 4	15	354
Rhinovirus/Enterovirus	151	2408
Respiratory syncytial virus (RSV)	166	776
Human metapneumovirus (hMPV)	18	75
Coronavirus	142	572
<b>Total</b>	<b>556</b>	<b>5184</b>



### **Other resources:**

#### **Vaccine:**

Influenza vaccine recommendation: [idph.iowa.gov/immtnb/immunization/vaccine](http://idph.iowa.gov/immtnb/immunization/vaccine)

CDC vaccine information: [www.cdc.gov/flu/fag/flu-vaccine-types.htm](http://www.cdc.gov/flu/fag/flu-vaccine-types.htm)

Vaccine finder: <http://vaccinefinder.org/>

#### **Neighboring states' influenza information:**

Illinois: [www.dph.illinois.gov/topics-services/diseases-and-conditions/influenza/influenza-surveillance#publications](http://www.dph.illinois.gov/topics-services/diseases-and-conditions/influenza/influenza-surveillance#publications)

Minnesota: [www.health.state.mn.us/divs/idepc/diseases/flu/stats/index.html](http://www.health.state.mn.us/divs/idepc/diseases/flu/stats/index.html)

Missouri: [health.mo.gov/living/healthcondiseases/communicable/influenza/reports.php](http://health.mo.gov/living/healthcondiseases/communicable/influenza/reports.php)

South Dakota: [doh.sd.gov/diseases/infectious/flu/](http://doh.sd.gov/diseases/infectious/flu/)

Wisconsin: [www.dhs.wisconsin.gov/influenza/index.htm](http://www.dhs.wisconsin.gov/influenza/index.htm)